## Form **8871**(July 2000)

For Paperwork Reduction Act Notice, see page 4.

## Political Organization Notice of Section 527 Status

OMB No. 1545-1693

General Information Employer identification number Name of organization 91 | 1850616 JEFF KROPF FOR STATE REPRESENTATIVE Mailing address (P.O. Box or number, street, and room or suite number) 31020 LAKE CREEK DRIVE City or town, state, and ZIP code HALSEY, OREGON 97348 E-mail address of organization 4a Name of custodian of records 4b Custodian's address 940 MAIN STREET SUITE E CAMPBELL TUMA & ASSOC. INC. LEBANON, OR 97355 5b Contact person's address 5a Name of contact person 940 MAIN STREET SUITE E JOLEEN CAMPBELL LEBANON, OR 97355 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number P.O. BOX 430 City or town, state, and ZIP code HALSEY, ORE 97348 Purpose Describe the purpose of the organization OREGON STATE REPRESENTATIVE DISTRICT 37, ELECTION CAMPAIGN COMMITTEE List of All Related Entities (see instructions) 8a Name of related entity 8b Relationship 8c Address juji 3 8 2000

Form 8871 (7-2000)		
	ers, Directors, and Highly Co	mpensated Employees (see instructions)
9a Name	9b Title	9c Address
JEFFREY L. KROPF LESLIE PULLEN	CANDIDATE/REPRESEN	31020 LAKE CREEK DRIVE
		HALSEY, ORE 97348
		743 PARK STREET
	TREASURER	
		LEBANON, OR 97355
		<u></u>
Under penalties of perju	ry. I declare that the organization named in	Part I is to be treated as an organization described in section 527 of the Intern
Revenue Code, and that it is true, correct, and co	t I have examined this notice, including acco	ompanying schedules and statements, and to the best of my knowledge and beli
w is vide, confect, and co	. /	/_
	V V	7/28/20
Sign   Signature of auth	orized official	Date
Here		·